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GREEN NEWSLETTER: MORE EMAILS PLEASE

The last issue of the *Certification Link* Newsletter asked for emails from staff so that this newsletter could be sent electronically. Thank you for the great response, but we have not heard from everyone. If you and other facility staff are willing to receive the newsletter by email please send the following information to us at mtssad@mt.gov:

- Name of Facility
- Email address or addresses to add to our distribution list. We do not limit the number of email addresses.

Once we have your name(s) and email addresses, we will no longer provide a hard copy. Thank you for your interest and let us know if there is a particular topic you would like us to discuss in the *Certification Link*.

CONSIDERING SOME UPGRADES IN THE FUTURE?

The DPHHS QAD Certification Bureau has issued the following information in conjunction with the Licensure Bureau. This guidance is for health care facilities that are certified (e.g. hospital, critical access hospitals, nursing homes, ambulatory surgery centers, end stage renal dialysis facilities) and are planning construction projects while residents or patients are still occupying areas of the facility. Construction may include large projects such as new additions, remodels, and simple remodels of existing facilities. All proposed changes to facilities should be sent to Joe Merrill, Construction Consultant, at DPHHS Quality Assurance Division, 2401 Colonial Drive, and Helena MT 59620. Minor changes do not have to be full architectural/engineering drawings, but must include a sketch of the current floor plan with changes noted.

Life safety code compliance during construction should include consideration of maintaining fire sprinkler systems, smoke detectors, exiting, smoke compartment requirements, etc. Re-certification surveys occur as required by federal requirements regardless of whether a facility is under construction or not.

Keep the following items in mind while under construction:

- All ceiling tiles shall be replaced after each day or a 24 hour / 7 days a week fire watch will need to be imposed until construction is complete.

- Temporary walls shall be made of non combustible or limited combustible materials that are the same rating as the wall they are temporarily replacing. An example would be sheet rock wall replacing a one hour wall will have to be one hour rated as well.
- Temporary enclosures shall be made of noncombustible panels or flame resistant tarpaulins and should meet NFPA 701. These temporary enclosures shall include a fire extinguisher equivalent to all classes of fires that could be expected.
- If construction involves closing off of required exits; temporary exit signage shall be used to redirect residents, patients, staff, and public to alternative routes.
- Temporary provisions made in the facility shall be maintained 24 hours/ 7 days a week until construction is complete.
- Train staff during the construction phase to include fire drills and temporary evacuation routes.
- Hot work such as torch cutting, welding, spark generating grinding, etc. requires a fire watch for the immediate area by construction staff.
- If proposed work will affect the emergency power circuits or the generator, a back-up generator may be required.
- Contact DPHHS Life Safety Code Supervisor at 406-444-4170 when the fire sprinkler and/or fire alarm system is down for more than 4 hours in a 24 hour period. A fire watch is required after this report is made and must continue until service is restored.

CERTIFICATION BUREAU CORE VALUES

- Personal Accountability/Individual Responsibility
- Integrity/Ethics in the Workplace
- Continuous Improvement



CNA HEADMASTER TESTING

By Madeline Aagenes, Nurse Aide Registry Program Mgr

Take advantage of the vocabulary study list in the back of Headmaster's CNA candidate handbook. The vocabulary words are taken directly from the test database. Testing statistics (7/09-12/09) revealed candidates frequently missed test items whose question or correct answer contained, referenced, or implied the following vocabulary words or phrases: sun-downing, CVA, intake and output, end of life care, anti-bacterial, bowel and bladder programs, respectful treatment and libel. The lowest areas of performance on the written exam were mental health & illness and growth & development across the ages.

KEYS, KEYS, KEYS

Be aware of who has keys to which rooms, drawers, building, etc. for your facility. As a point of securing records, the administrator should know who has access to all areas when the surveyors ask.

LONG TERM CARE SURVEYOR TIP OF THE QUARTER

By Cynthia Galaska, RN

Deficiency Tag F441 covers linen handling and reads as follows, "Personnel must handle, store, process and transport linens so as to prevent the spread of infection." CDC Guidelines for Environmental Infection Control in Health-Care Facilities further addresses processing laundry, ". . . Package, transport, and store clean textiles and fabrics by methods that will ensure their cleanliness and protect them from dust and soil during interfacility loading, transport, and unloading." Personal laundry should be covered when it is transported from the laundry facilities to the resident's rooms.

BEST PRACTICES

In surveyor travels around the state, we see many creative ideas that we'd like to share. For example:

- A survey team visited a long-term-care facility that had mesh bags containing a box of antibacterial wipes hanging on their lifts. CNAs wiped down the lift with the wipes after each use. What a good infection control practice!
- An administrator of a long term care facility has the pharmacist review all the medications after a resident fall as part of the overall investigation. It seems to be very helpful for the medical staff.

FOOD PREPARATION TIP

By Didem Park, RDLN, LSC & Health Surveyor

Deficiency Tag F371 is one of the most frequently cited tags for long term care facilities. All kitchen food preparation equipment must be cleaned thoroughly within 30 minutes after each use. This is particularly important for the Hobart mixers.

Additionally, make sure that your staff is well trained in hand hygiene practices. The use of the alcohol based hand sanitizers (ABHS) should be limited in the kitchen to eliminate contact with the ready to eat foods. ABHS can be utilized between glove changes as long as there is no visible food or other debris on the soiled gloves. ABHS should not be used between two different tasks; instead hand washing should be practiced between two different tasks.

PROVIDER NOTICES ON WEBSITE

Have you looked at our website lately? You may find some useful information and timely topics. Topics such as Smudging, Electronic Cigarettes, Holiday Decorations, Facilities Requirements during Construction, and Medical Marijuana use in Health Care Facilities are all listed under the Provider Notices. Check them out and bookmark the site for when a question arises in your facility. The website address is located on the front of the *Certification Link* newsletter.

PERFORM YOUR OWN MOCK SURVEYS FOR NON LONG TERM CARE FACILITIES!

The Certification Bureau's website has survey forms to perform a mock survey for your Ambulatory Surgery Center, Hospital, Critical Access Hospital or Rural Health Clinic. The forms are identical to the ones the surveyors use when they come to your facility. You can take a section a month, or do it all at once. However you use the forms, you'll be better prepared when the surveyors arrive.